Marriage License Application: Groom's Worksheet

Marriage License#_____

First
Name_____Middle_____Last_____

Residence - State_____ County_____City, Town_____
Within City Limits: Yes or No

Street Address_____

Birth Place (County & State)_____

Date of Birth (Month, Day, Year)_____Age_____

Social Security #_____

_ _

Father's Name _____

State of Birth_____

Address if living (City & State)_____
check if Deceased_____

Mother's Name at birth (Maiden Name)_____

State of Birth_____

Address if living (City & State)_____
check if Deceased_____

Race (Optional)_____ Number of this marriage - First, Second, etc.(Specify)_____

Last marriage ended by (Divorce, Death, etc) _____

Date last marriage ended (Month & Year)_____

Education - Specify the highest grade completed

Elementary_____ High School_____ College_____
          1 2 3 4 5 6 7 8   9 10 11 12   1 2 3 4 5 6